

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

09/830507

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1	1											
2		1					51					
3		2					52					
4		3					53					
5	1						54					
6		1					55					
7		2					56					
8		3					57					
9		1					58					
10	1						59					
11		1					60					
12		2					61					
13		2					62					
14		2					63					
15		2					64					
16	1						65					
17		1					66					
18		1					67					
19		1					68					
20							69					
21							70					
22							71					
23							72					
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25							74					
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39							88					
40							89					
41							90					
42							91					
43							92					
44							93					
45							94					
46							95					
47							96					
48							97					
49							98					
50							99					
TOTAL IND.	4						100					
TOTAL DEP.		23					TOTAL IND.					
TOTAL CLAIMS	27						TOTAL DEP.					
							TOTAL CLAIMS					

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE